

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF NEW YORK

COURT INTERPRETER APPLICATION

Personal Information

Last Name:	First Name:	Middle:
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Home Phone:	At which phone number(s) are you most likely to be reached <u>during the day</u> (circle)? Home Work Cell
Work Phone:	
Cell Phone:	

Street Address:		
City:	State:	Zip Code:

Social Security Number / Tax ID Number:

E-mail Address:

Education (Please list all education above elementary level)

Name of School	City/Country	# of Years Attended	Degree

Specialized Training (Please include language courses completed)

Name of Course	Date(s) Attended	Certificate Awarded

Have you been certified as an interpreter by the Administrative Office of U.S. Courts?

_____ NO _____ YES Date of certification: _____

Linguistic Ability

Language	Read	Write	Speak	Interpret	Level of Proficiency

Experience - Please list the institutions in which you have interpreted

State or County Courts	Federal Courts	Other

Availability

Please specify what hours you are available to work as an interpreter: _____

Please specify what court locations you are able to serve:

Albany	Binghamton	Syracuse	Utica	Watertown	Plattsburgh

I hereby certify that the above information is accurate and wish to be placed on the roster of foreign language interpreters utilized by the U.S. District Court for the Northern District of New York.

Signed:	Date:
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Mail this completed form to:
Penny Price
U.S. District Court
Northern District of New York
100 South Clinton Street
Syracuse NY 13261-7367